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	FORM	<u>_</u>		Jeffrey W.	Adair				
Art Unit 3681									
(to be used for all correspondence after initial filing) Examiner Name Rodney H. Bonck									
Total Number of Pages in This Submission 3 Attorney Docket Number 03067/02006									
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Incomplete	e Application apply to Missing Parts								
	der 37 CFR 1.52 or 1.53								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name Emch, Schaffer, Schaub & Porcello, Co., L.P.A.									
Signature	Signature Charles R. Achaut								
Printed name Charles R. Schaub									
Date	ate 10-6-05 Reg. No. 27,518								
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FEE TRANSMITTAL For FY 2005 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 120.00 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge end additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES Small Entity Application Type Fee (\$) Fee	I ≚/ Effe	ctive on 12/08/	2004.			Co	mplete if Knov	PARTMENT OF C S a valid OMB con
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TOTAL AMOUNT OF PAYMENT (\$) 120.00 Attorney Docket No. 03067/Dkt02006 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 15-0825 Deposit Account Name: Owen & Owen Server for the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the fee(s) under 37 CFR 1.16 and 1.17 WARNINS: Information on this form may become public. Credit card information should not be included on this form. Provide credit crifformation and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fee (\$					Examiner Name			
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✓ Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Name: Owen & Owen For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the form and additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES	TOTAL AMOUNT OF PA	YMENT (5) 120.00		Attorney Docket	No. 0	3067/Dkt02006	
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SUBMITTED BY		
Signature	halo R Arhaut Registration No. 27,518	Telephone 419-243-1294
Name (Print/Type)	Charles R. Schaub	Date 10-6-05

120.00

Non-English Specification, \$130 fee (no small entity discount)
Other (e.g., late filing surcharge): Petition for Extension of Time

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